

**CLAIMS ONLY**

Application Number  
10068239

**Filing Date**

**Applicant(s)**

- May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	I					
2		I				
3		I				
4		I				
5	I					
6	I					
7		I				
8		I				
9		I				
10		I				
11		I				
12		I				
13		I				
14	I					
15		I				
16		I				
17		I				
18		I				
19	I					
20		I				
21		I				
22		I				
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25		I				
26		I				
27		I				
28		I				
29		I				
30		I				
31		I				
32		I				
33		I				
34		I				
35		I				
36		I				
37		I				
38		I				
39		I				
40		I				
41		I				
42		I				
43						
44						
45						
46						
47						
48						
49						
50						
Total Indep	5					
Total Depend	37					
Total Claims	42					

	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
53						
54						
55						
56						
57						
58						
59						
60						
61	-					
62						
63						
64						
65						
66						
67						
68						
69						
70						
71						
72						
73						
74						
75						
76						
77						
78						
79						
80						
81	-					
82						
83						
84						
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93						
94						
95						
96						
97						
98						
99						
100						
Total Indep						
Total Depend						
Total Claims						

BEST AVAILABLE COPY